BIRCH, STEWART, KOLASCH & BIRCH, LLP P.O. Box 747 Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST, COMPLETE THE FOLLOWING

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	MODULARIZED UNI	VERSAL JAC	KET FOR PERSONAL DI	GITAL ASSISTANTS						
Fill in Appropriate Information -	the specification of which is attached hereto. If not attached hereto, the specification was filed onas United States Application Number;									
For Use Without Specification	United States Ap		(if applicable	e) and/or						
Attached:	the specification	was filed on_		(it applicable) and/of						
	International Ap	plication Num	iber		;	and was				
•	amended on				(if applicable)					
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federa Regulations, 56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my lega representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, 19(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having									
	or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:									
	Prior Foreign Appl	ication(s)		Priority Claimed						
Insert Priority Information:	91215989	מעדביי	N. R.O.C.	OCTOBER 8, 2002	Q					
(if appropriate)	(Number)	(Countr		(Month/Day/Year Filed)	Yes	No				
	,	·	•							
	(Number)	(Countr	ry)	(Month/Day/Year Filed)	Yes	No				
	,	•	••							
	(Number)	(Countr		(Month/Day/Year Filed)	Yes	No				
	,	•	**	, , , , , , , , , , , , , , , , , , , ,						
	(Number)	(Countr	y)	(Month/Day/Year Filed)	Yes	No				
	I hereby claim the ber	nefit under Titl	le 35, United States Code,	19(e) of any United States provisiona	l applications(s) l	isted below.				
Insert Provisional										
Application(s): (if any)	(Application Number)			(Filing Date)						
	(Application Number)			(Filing Date)						
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:									
	Country		Application Number	Date of Filing (Mor	ith/Day/Year)					
Insert Requested Information: (if appropriate)			·							
	I hereby claim the benefit under Title 35, United States Code, 20 of any United States and/or PCT application(s) listed below an insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PC application in the manner provided by the first paragraph of Title 35, United States Code, 12, I acknowledge the duty to discloinformation which is material to the patentability as defined in Title 37, Code of Federal Regulations, .56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
Insert Prior U.S.				(0)						
Application(s): (if any)	(Application Number	:)	(Filing Date)	(Status - patented, p	pending, abandoi	ned)				
Page 1 of 2 (Rev. 12/19/01)	(Application Number	r)	(Filing Date)	(Status - patented,	pending, abandor	ned)				

Attorney Do	cket No	2019-0218P

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventor: Insert Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
Full Name of First or Sole Inventor: insert Name of inventor insert Date This Document is Signed	GARY HSU (FAMILY NAME: HSU)	Lam Why		SEPTEMBER 3, 2003					
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nsert Citizenship →	SAME AS MAILING ADDRESS	TAIWAN, R.O.C.							
nsert Mailing Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)								
	2F, NO. 240-4, SEC. 1, WEN HUA ERH RD., LIN KOU HSIANG, TAIPEI HSIEN, TAIWAN, R.O.C.								
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
	Residence (City, State & Country)	CITIZENSHIP							
	MAILING ADDRESS (Complete Street Address including City, State & Country)								
Full Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
	Residence (City, State & Country)	CITIZENSHIP							
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ull Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
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ull Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*					
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ull Name of Sixth Invenior, if any: see above		s including City, State & Country) INVENTOR'S SIGNATURE	CITIZENSHI	DATE*					
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